



PTO/SB/22 (12-04)  
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|  |               |                          |
|--|---------------|--------------------------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>  |               | Docket Number (Optional) |
| <b>FY 2005</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i> |               | <b>11348-135100</b>      |
| Application Number   | 10 / 814, 592 | Filed March 31, 2004     |
| For CAPPING OF COPPER STRUCTURES IN HYDROPHOBIC ILD USING ...                                      |               |                          |
| Art Unit   | 2818          | Examiner Berry, Renee R. |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

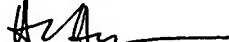
|   | <u>Fee</u> | <u>Small Entity Fee</u> |                |
|---|------------|-------------------------|----------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))              | \$120      | \$60                    | \$ _____       |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))             | \$450      | \$225                   | \$ _____       |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))           | \$1020     | \$510                   | \$ _____       |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))            | \$1590     | \$795                   | \$ _____       |
| <input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2160     | \$1080                  | \$ <u>2160</u> |

- Applicant claims small entity status. See 37 CFR 1.27. 10/18/2005 BABRAHA1 00000004 10814592
- A check in the amount of the fee is enclosed. 01 FC:1255 2160.00
- Payment by credit card. Form PTO-2038 is attached.
- The Director has already been authorized to charge fees in this application to a Deposit Account.
- The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 500393. I have enclosed a duplicate copy of this sheet.

**WARNING: Information on this form may become public. Credit card information should not be included on this form.  
Provide credit card information and authorization on PTO-2038.**

I am the  applicant/inventor.

- assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- attorney or agent of record. Registration Number \_\_\_\_\_
- attorney or agent under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34 35,432

  
\_\_\_\_\_  
Signature

October 10, 2005

Date

Al AuYeung

503-222-9981

Typed or printed name

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



In view of the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$)  
2460

**Complete if Known**

|                      |                 |
|----------------------|-----------------|
| Application Number   | 10/814,592      |
| Filing Date          | March 31, 2004  |
| First Named Inventor | O'Brien         |
| Examiner Name        | Berry, Renee R. |
| Art Unit             | 2818            |
| Attorney Docket No.  | 110348-135100   |

**METHOD OF PAYMENT** (check all that apply)

- Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_
- Deposit Account Deposit Account Number: 500393 Deposit Account Name: Schwabe Williamson et al.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee
- Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| <b>Application Type</b> | <b>FILING FEES</b>  |                 | <b>SEARCH FEES</b>  |                 | <b>EXAMINATION FEES</b> |                 |                       |
|-------------------------|---------------------|-----------------|---------------------|-----------------|-------------------------|-----------------|-----------------------|
|                         | <b>Small Entity</b> | <b>Fee (\$)</b> | <b>Small Entity</b> | <b>Fee (\$)</b> | <b>Small Entity</b>     | <b>Fee (\$)</b> | <b>Fees Paid (\$)</b> |
| Utility                 | 300                 | 150             | 500                 | 250             | 200                     | 100             |                       |
| Design                  | 200                 | 100             | 100                 | 50              | 130                     | 65              |                       |
| Plant                   | 200                 | 100             | 300                 | 150             | 160                     | 80              |                       |
| Reissue                 | 300                 | 150             | 500                 | 250             | 600                     | 300             |                       |
| Provisional             | 200                 | 100             | 0                   | 0               | 0                       | 0               |                       |

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

**Small Entity****Fee (\$)****Fee (\$)**

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims |
|--------------|--------------|----------|---------------|---------------------------|
|--------------|--------------|----------|---------------|---------------------------|

|    |                |      |       |          |               |
|----|----------------|------|-------|----------|---------------|
| 25 | - 20 or HP = 2 | x 50 | = 100 | Fee (\$) | Fee Paid (\$) |
|----|----------------|------|-------|----------|---------------|

HP = highest number of total claims paid for, if greater than 20.

|               |              |          |               |  |  |
|---------------|--------------|----------|---------------|--|--|
| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |  |  |
|---------------|--------------|----------|---------------|--|--|

|   |               |       |       |  |  |
|---|---------------|-------|-------|--|--|
| 7 | - 3 or HP = 1 | x 200 | = 200 |  |  |
|---|---------------|-------|-------|--|--|

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
|--------------|--------------|--|----------|---------------|

|         |        |                                |   |  |
|---------|--------|--------------------------------|---|--|
| - 100 = | / 50 = | (round up to a whole number) x | = |  |
|---------|--------|--------------------------------|---|--|

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

**Fees Paid (\$)**

Other (e.g., late filing surcharge): Petition for Extension of Time (5 months)

2160

**SUBMITTED BY**

|                   |                       |   |                        |
|-------------------|-----------------------|---|------------------------|
| Signature         |                       | Registration No.<br>(Attorney/Agent) 35,432 | Telephone 503 222 9981 |
| Name (Print/Type) | Aloysius T.C. AuYeung |   |                        |

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